THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA-DEVI SIDDHARTHA): (a) to (d) Information is being collected and will be placed on the Table of the House.

Jammu and Kashmir Medical Candidates in AU India Competitions

1916. SHRI SHABBIR AHMAD SALARIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that MCI does not at present allow candidates from Jammu and Kashmir to compete for PHD/ MD/MS examinations in All India Competitions held by it;

(b) whether it is also a fact that the Governor of the State has already forwarded a report for allowing Jammu and Kashmir candidates to compete in the same; and

(c) whether Government propose to take an early decision for allowing Jammu and Kashmir candidates to compete with others and to earmark seats for them?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA-DEVI SIDDHARTHA), (a) The Medical Council of India is not conducting any All India Competition for entrance to MD/ MS Courses to the Medical Colleges in India. All India PG Entrance Examination are conducted by the All India Institute of Medical Sciences, New Delhi. The State of Jammu and Kashmir and Andhra Pradesh had themselves opted out of this scheme and hence not included in it.

(b) and (c) The Government of Jammu and Kashmir has now expressed its wil-ingness to participate in the All India Scheme. They have been requested to furnish the information regarding the names and number of medical colleges and the number of seats allocated to All India Under-graduate and Post-graduate quota. The information is awaited from the State Government. Appropriate action can be teen only after the receipt of the requisite information fromthe Government of Jammu and Kashmir

Control of Population Growth

1917. SHRI MENTAY PADMANA-BHAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the lack of commitment on the part of bureaucracy has come in the way of checking population growth;

(b) what is Government's reaction to the alarming tendencies and rapid growth in population as revealed by the 1991 census;

(c) what are the details of the proposed VAFAH apex body;

(d) whether the body is likely to be dominated by Government; and

(e) what are the safeguards being consi-dered for allowing VAFAH to try new ideas to control population growth?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA-DEVI SIDDHARTHA): (a) No, Sir.

(b) Faced with the grim proppects of the population explosion it is considered necessary to devise innovative strategies for imparting a new thrust and dynamism to the population control efforts in the country. . While the population control programme has to essentially evolve as a multi-sectoral programme, comprising many aspects which go beyond the activities under the family welfare sector an exercise has been initiated during the last 4—5 months to evolve a result-oriented Action Plan in close consultation with the State Governments/UTs Administration. Accordingly, based on the consensus reached in a meeting of Secretaries Tncharge of Family Welfare of States/UTs held at New Delhi on the 29—30th August, 1991, a draft Action Plan has been formulated.

This has been sent to the State Govern-ments/TJTs Administration with the request that they may consider this Action Plan further and suggest improvements, if

any, required to be made to suit their local conditions. It is proposed to be finalised in a meeting of Health Ministetrs of the States/UTs very shortly. It is expected that the Action Plan evolved in this manner will be more practical and result oriented, because while the Central Government provides funds for the Programme and lays down broad framework, the actual implementation is the responsibility of the States/UTs.

(c) to (e) The details of the proposed VAFAH apex body have not yet been finished.

Introduction of Low-Dose Pill

1918. SHRI SYED SIBTEY RAZI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether any Low-dose pill of international Standard on family planning has been introduced in the country;

(b) if so, the details thereof with sources of availability of same in the country;

(c) the extent to which the step is likely to check the growth of population; and

(d) if so, the details of the funds proposed to be spent in their regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA-DEVI SIDDHARTHA); (a) Yes, Sir.

(b) Under the National Family Welfare Programme, low dose oral contraceptive pills with brand names Mala-N, Mala-D, Ecroz and Pearl are offered. Whereas, Mala-N is distributed free through Family Welfare Centres and Workers and some Non-Governmental machinery, other brands are sold through chemists/druggist outlets through selected voluntary orgain-sations and pharmaceutical marketing companies. While Mala-N and Mala-D are available throughout the country. 'Ecroz' and 'Pearl' are marketed by concerned voluntary organisations only in selected States.

(c) These pills when taken regularly are highly efficatious in preventing pregnancies at such the Pill is an efficient method for birth spacing and population control.

(d) The funds for this programme in the Eighth Plan is dependent upon the allocattion to be made for the National Family Welfare Programme.

Infant Mortality and Birth Rate

1919. SHRI PRAMOD MAHAJAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what was the infant mortality rate during the last three years at national level and at level of states, state-wise; and

(b) what was the birth rate during the same period at national level and the level of States, State-wise

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA-DEVI SIDDHARTHA): (a) A statement indicating infant mortality rates for the last three years at national level and at the level of states, state-wise as per the Samples Registration System (SRS) of Registrar General of India is given at Statement—I. *(See* below). The SRS system provides the estimates only for the major State.

(b) the birth rate for the samet period at national level and the leval of States, state-wise as per SRS of Registrar General of Tndia is at Statement—IT. *(See* below)

Statement-I

Estimated Infant Mortality Rate for Major States: 1988, 1989—1990
(Sample Registration System)

State	Infant Mortality Rate		
	1988	1989	1990
Andhra Pradesh	83	81	70
Assam	99	91	77
Bihar	97	91	95